

02-08-01

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

02/07/01
jc853 U.S. PRO

02/07/01
09777846
U.S. PRO

In re Application of: Jean-Paul CANO et al.

Filed: Concurrently Herewith

For: OPHTHALMIC LENS MADE OF ORGANIC GLASS WITH A SHOCKPROOF
INTERMEDIATE LAYER; AND METHOD FOR MAKING SAME

Serial No.: Unknown

Group Art Unit: Unknown

Examiner: Unknown

Atty. Docket No.: ESSI:005CP1

EXPRESS MAIL CERTIFICATION

NUMBER: 703719395US

I hereby certify that this paper or fee is being deposited with the United States Postal Service "EXPRESS MAIL POST OFFICE TO ADDRESSEE" service, postage prepaid, under 37 C.F.R. 1.10 on the date indicated below and is addressed to: Assistant Commissioner of Patents, Washington, D.C. 20231.

Albire Ferrara
Signature

2-7-01
Date of Deposit

BOX PATENT APPLICATION
Assistant Commissioner For Patents
Washington, D.C. 20231

Dear Sir:

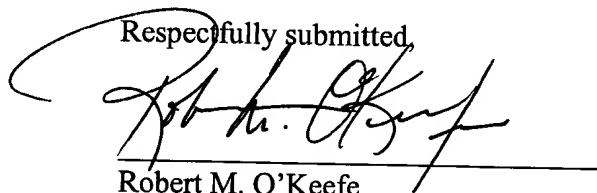
Transmitted herewith for filing are:

- ☒ New Patent Application consisting of 30 pages and 0 Figs.
- ☐ Response to Missing Parts
- ☐ Assignment and Recordation Cover sheet -- the parent application is assigned of record to _____.
- ☐ Inventors' Declaration/Power of Attorney
- ☐ Information Disclosure Statement
- ☐ Petition for a _____ month extension of time
- ☐ Response to Office Action

- ☐ Preliminary Amendment
- ☐ Formal Drawings
- ☐ Informal Drawings
- ☐ Notice of Appeal
- ☐ An Appeal Brief (an original and two copies)
- ☐ Check in the amount of \$
- ☐ The Commissioner is authorized to deduct any requisite fees under 37 CFR 1.16 to 1.21 from, or deposit any credits to, Deposit Account No. 10-1205/
- ☒ Postcard. Please date stamp and mail this postcard to acknowledge receipt of the enclosed documents.
- ☐ Other:

The Examiner is invited to contact the undersigned at 512-347-1611 with any questions or comments, or to otherwise facilitate expeditious prosecution of the application.

Respectfully submitted,



Robert M. O'Keefe
Registration No. 35,630
Attorney for Applicant

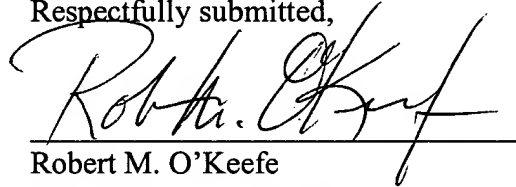
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FEE CALCULATION:

CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	Total Claims (37 CFR 1.16(e))	<u>21</u> - 20 =	1	x \$ 18.00	\$ 18.00
	Independent Claims (37 CFR 1.16(b))	<u>1</u> - 3 =	0	x \$ 80.00	\$ 0
	MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.16(d))			x \$ 270.00	\$
				Basic Fee (37 CFR 1.16(a))	\$ 710.00
				Total of above Calculations =	\$ 728.00
	Reduction by 50% for filing by Small Entity (Note: 37 CFR 1.9, 1.27, 1.28)				\$ 0
	Surcharge for submission of Response to Missing Parts if applicable (\$130)				\$ 130.00
	ASSIGNMENT FEE (IF FILED WITH APPLICATION)				\$ 40.00
	TOTAL =				\$ 898.00

The Examiner is invited to contact the undersigned at 512-347-1611 with any questions or comments, or to otherwise facilitate expeditious prosecution of the application.

Respectfully submitted,



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